

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) People's Action Movement		FEC IDENTIFICATION NUMBER ▼ C C00567479	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY 10 / 18 / 2016	

Full Name of Payee Keystone Progress		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016	
Mailing Address 201 Washington St. #534		Amount 14823.13	
City Reading	State PA	Zip Code 19601	Transaction ID : SE.5094
Purpose of Expenditure Field Program - Stop Trump		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 07 / 2016
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		60656.86	

Full Name of Payee Keystone Progress		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016	
Mailing Address 201 Washington St. #534		Amount 1430.60	
City Reading	State PA	Zip Code 19601	Transaction ID : SE.5099
Purpose of Expenditure Printing - Stop Trump		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 07 / 2016
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		62087.46	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	16253.73
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Geise, Tara, M., ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 24 / 2016

Signature

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		MM / DD / YYYY 10 / 18 / 2016	

Full Name of Payee People's Action		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016	
Mailing Address 810 N. Milwaukee Ave.		Amount 2421.99	
City Chicago	State IL	Zip Code 60642	Transaction ID : SE.5087
Purpose of Expenditure Payroll & Benefits - Stop Trump		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		2421.99	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee People's Action		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2016	
Mailing Address 810 N. Milwaukee Ave.		Amount 10754.07	
City Chicago	State IL	Zip Code 60642	Transaction ID : SE.5092
Purpose of Expenditure Field Program - Stop Trump		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		18312.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	13176.06
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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		M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2016	

Full Name of Payee People's Action		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2016	
Mailing Address 810 N. Milwaukee Ave.		Amount 814.80	
City Chicago	State IL	Zip Code 60642	Transaction ID : SE.5100
Purpose of Expenditure Printing - Stop Trump	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 06 / 2016	
Name of Federal Candidate TRUMP, DONALD J., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		19127.44	

Full Name of Payee People's Action		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2016	
Mailing Address 810 N. Milwaukee Ave.		Amount 5136.58	
City Chicago	State IL	Zip Code 60642	Transaction ID : SE.5101
Purpose of Expenditure Payroll & Benefits - Stop Trump	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 06 / 2016	
Name of Federal Candidate TRUMP, DONALD J., , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		7558.57	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5951.38
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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		M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2016	

Full Name of Payee People's Action		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 810 N. Milwaukee Ave.		Amount 193.80	
City Chicago	State IL	Zip Code 60642	Transaction ID : SE.5086
Purpose of Expenditure Website - Stop Trump	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2016	
Name of Federal Candidate TRUMP, DONALD J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		78874.39	

Full Name of Payee		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure	Category/ Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	193.80
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	35574.97

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